FEC FORM

STATEMENT OF ORGANIZATION

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FORM 1 ORGANIZATION					۰ ۱	0101			
					FEGMMAJLMCENTER				
1. NAME OF COMMITTEE (in		(Check if name is changed)		mple:If typing, type the lines.	12FE4	M5			
Big Sky Or	pportunity F	PAC			111		<u> </u>		
				111111	111				
ADDRESS (number and street) PO Box 1618									
(Check if ac is changed)		Helena			MT 59624				
		C	CITY		STATE		ZIP CC	DE	
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)									
(Check if		a@mt.net				111			لب
is change							111		لــــا
COMMITTEE'S WEB	PAGE ADDRESS (L	IRL)							
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(Check if is change									—— ——
2. DATE 02 ' 18 ' 2013 '									
3. FEC IDENTIFICATION NUMBER									
4. IS THIS STATE	MENT NEV	/ (N) OR		AMENDED (A)					
I certify that I have	examined this Statem	ent and to the best	of my	knowledge and belief it	is true, con	rect and cor	nplete.		
Type or Print Name	of Treasurer LO	rna Kuney							
Signature of Treasur	er O	eno fun	ney		Date [<u>)2</u> ′ [1	8 ° ′	201	3 [`]
NOTE: Submission of			-	oject the person signing the		•	alties of 2	2 U.S.C.	 §437g.
Office Use Only				For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100			C FO		